POSITION	INITIALS	ID NO.	
FEE DETERMINATION	T.D.		6/9/99
O.I.P.E. CLASSIFIER	ED		6-15-99
FORMALITY REVIEW		08904	7/29/99
		08904	10/5/99

INDEX OF CLAIMS

✔	.... Rejected		N	.... Non-elected
=	.... Allowed		I	.... Interference
—	(Through numeral)... Canceled		A	.... Appeal
÷	.... Restricted		O	.... Objected

Claim		Date									Claim		Date									Claim		Date							
Final	Original										Final	Original										Final	Original									
	1	+	+	N	N							51	+	N	N								101	—	N	N					
	2											52											102								
	3											53											103								
	4											54											104								
	5											55											105								
	6											56											106								
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	9											59											109								
	10											60											110								
	11											61											111								
	12											62											112	✔	✔						
	13											63											113	✔	✔						
	14											64											114								
	15											65											115								
	16											66											116	✔	✔						
	17											67											117	✔	✔						
	18											68											118	N	N						
	19											69											119								
	20											70											120								
	21											71											121	✔	✔						
	22											72											122	✔	✔						
	23											73	✔	✔									123								
	24											74	✔	✔									124								
	25	+	N	N								75											125								
	26											76	N	N									126								
	27	+	N	N								77											127	✔	✔						
	28											78											128	N	N						
	29	+	N	N								79											129								
	30											80											130								
	31											81											131								
	32											82	✔	✔									132								
	33											83	✔	✔									133								
	34											84											134								
	35											85											135								
	36											86											136								
	37	+	N	N								87											137								
	38											88											138								
	39											89											139								
	40	✔	✔	✔								90	✔	✔									140								
	41											91	N	N									141								
	42											92											142								
	43											93											143								
	44	+	N	N								94											144								
	45											95											145								
	46	+	N	N								96											146								
	47											97											147								
	48											98											148								
	49	✔										99											149								
	50	+	N	N								100	✔	✔	✔								150	✔	✔	✔					

If more than 150 claims or 10 actions
staple additional sheet here

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POSITION		ID NO.	DATE
CLASSIFIER			
EXAMINER			9-21-92
TYPIST			9/22
VERIFIER			
CORPS CORR.			
SPEC. HAND			
FILE MAINT.			
DRAFTING			

INDEX OF CLAIMS

Final	Original	Date						
10	1							
10	2							
10	3							
10	4							
10	5							
10	6							
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10	8							
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SYMBOLS
✓ .... Rejected
= .... Allowed
- (Through numeral) Canceled
+ .... Restricted
N .... Non-elected
I .... Interference
A .... Appeal
O .... Objected

Final	Original	3/21/01	4/30/01	3/6/02				
	151	✓	N	N				
	152							
	153							
	154							
	155	✓	✓	✓				
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